

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S99709

Entity Name: FLYING V, INC.

FILED  
Jan 04, 2005  
Secretary of State

## Current Principal Place of Business:

711 E. BROADWAY  
FT. MEADE, FL 33841

## New Principal Place of Business:

## Current Mailing Address:

P.O BOX 864  
FT. MEADE, FL 33841

## New Mailing Address:

FEI Number: 59-3110901

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BLACK, N. L.  
711 E. BROADWAY  
P.O BOX 864  
FT. MEADE, FL 33841 US

## Name and Address of New Registered Agent:

BLACK, NORMAN L  
711 E. BROADWAY  
P.O BOX 864  
FT. MEADE, FL 33841 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: NORMAN L. BLACK

01/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: NUNNALLEE, KAROLYN V  
Address: 300 NE 3RD STREET  
City-St-Zip: FORT MEADE, FL 33841

Title: DVP ( ) Delete  
Name: BLACK, NORMAN L  
Address: 711 E. BROADWAY  
City-St-Zip: FORT MEADE, FL 33841

Title: DST ( ) Delete  
Name: BLACK, PHYLLIS V  
Address: 711 E BROADWAY  
City-St-Zip: FORT MEADE, FL 33841

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NORMAN L. BLACK

DVP

01/04/2005

Electronic Signature of Signing Officer or Director

Date